

General

Title

Schizophrenia: percent of patients with family members or caregivers who have had no contact with clinic providers during the past year.

Source(s)

Young AS, Sullivan G, Burnam MA, Brook RH. Measuring the quality of outpatient treatment for schizophrenia. Arch Gen Psychiatry. 1998 Jul;55(7):611-7. [PubMed](#)

Measure Domain

Primary Measure Domain

Process

The validity of measures depends on how they are built. By examining the key building blocks of a measure, you can assess its validity for your purpose. For more information, visit the [Measure Validity](#) page.

Secondary Measure Domain

Does not apply to this measure

Brief Abstract

Description

This measure is used to assess the percent of patients with family members or caregivers (with whom they have contact at least twice a week) who have had no contact with clinical providers during the past year.

Rationale

Schizophrenia is a chronic, disabling brain disorder that occurs in about 1% of the population. It accounts for more than 10% of all disabled people in the United States (U.S.) and 2.5% of all U.S. healthcare expenditures. The cost due to society of schizophrenia is enormous (more than \$20 billion/year in the U.S. alone). The quality of care for schizophrenia is frequently poor. There is a critical need for measures

of important domains of treatment process for this disorder.

Family services have reduced rehospitalization rates and improved functioning.

Primary Clinical Component

Schizophrenia; family/caregiver involvement/contact with providers

Denominator Description

The number of patients with schizophrenia in the sample

Numerator Description

The number of patients from the denominator with 1) family members or caregivers with whom they have contact at least twice per week, and 2) no contact between the caregivers and clinic providers during the past year

Evidence Supporting the Measure

Evidence Supporting the Criterion of Quality

A clinical practice guideline or other peer-reviewed synthesis of the clinical evidence

A formal consensus procedure involving experts in relevant clinical, methodological, and organizational sciences

A systematic review of the clinical literature

One or more research studies published in a National Library of Medicine (NLM) indexed, peer-reviewed journal

Evidence Supporting Need for the Measure

Need for the Measure

Overall poor quality for the performance measured

Variation in quality for the performance measured

Evidence Supporting Need for the Measure

Lehman AF, Steinwachs DM. Patterns of usual care for schizophrenia: initial results from the Schizophrenia Patient Outcomes Research Team (PORT) Client Survey. Schizophr Bull. 1998;24(1):11-20; discussion 20-32. [PubMed](#)

Lehman AF. Quality of care in mental health: the case of schizophrenia. Health Aff (Millwood). 1999 Sep-Oct;18(5):52-65. [PubMed](#)

State of Use of the Measure

State of Use

Current routine use

Current Use

Internal quality improvement

Application of Measure in its Current Use

Care Setting

Ambulatory Care

Behavioral Health Care

Professionals Responsible for Health Care

Advanced Practice Nurses

Nurses

Physicians

Psychologists/Non-physician Behavioral Health Clinicians

Lowest Level of Health Care Delivery Addressed

Single Health Care Delivery Organizations

Target Population Age

Age greater than or equal to 18 years

Target Population Gender

Either male or female

Stratification by Vulnerable Populations

Unspecified

Characteristics of the Primary Clinical Component

Incidence/Prevalence

Schizophrenia occurs in about 1% of the population.

Evidence for Incidence/Prevalence

Young AS. Personal communication: NQMC submission form. 2002 Dec 27. 3 p.

Association with Vulnerable Populations

Unspecified

Burden of Illness

Schizophrenia is a chronic, disabling brain disorder that accounts for more than 10% of all disabled people in the United States.

Evidence for Burden of Illness

Young AS. Personal communication: NQMC submission form. 2002 Dec 27. 3 p.

Utilization

Unspecified

Costs

Schizophrenia accounts for 2.5% of all United States (U.S.) healthcare expenditures. The cost due to society of schizophrenia is enormous (more than \$20 billion/year in the U.S. alone).

Evidence for Costs

Young AS. Personal communication: NQMC submission form. 2002 Dec 27. 3 p.

Institute of Medicine (IOM) Healthcare Quality Report Categories

IOM Care Need

Living with Illness

IOM Domain

Patient-centeredness

Data Collection for the Measure

Case Finding

Users of care only

Description of Case Finding

Adult patients age greater than or equal to 18 years with the diagnosis of schizophrenia or schizoaffective disorder who had been in treatment for at least 3 months

Denominator Inclusions/Exclusions

Inclusions

Adult patients between the age greater than or equal to 18 years with the diagnosis of schizophrenia or schizoaffective disorder who had been in treatment for at least 3 months

Exclusions

Patients with more than 21 days in the hospital during the previous 3 months

Relationship of Denominator to Numerator

All cases in the denominator are equally eligible to appear in the numerator

Denominator (Index) Event

Clinical Condition

Patient Characteristic

Denominator Time Window

Time window precedes index event

Numerator Inclusions/Exclusions

Inclusions

The number of patients 1) with a family member or other caregiver with whom they have contact at least twice per week, and 2) whose family members or caregivers have had no contact with clinic providers during the past year

Exclusions

Unspecified

Measure Results Under Control of Health Care Professionals, Organizations and/or Policymakers

The measure results are somewhat or substantially under the control of the health care professionals, organizations and/or policymakers to whom the measure applies.

Numerator Time Window

Fixed time period

Data Source

Administrative data

Medical record

Patient survey

Level of Determination of Quality

Individual Case

Pre-existing Instrument Used

Structured Clinical Interview for the Diagnostic and Statistical Manual of Mental Disorders, Fourth Edition (DSM-IV), Patient Edition

Computation of the Measure

Scoring

Rate

Interpretation of Score

Better quality is associated with a lower score

Allowance for Patient Factors

Unspecified

Standard of Comparison

Internal time comparison

Evaluation of Measure Properties

Extent of Measure Testing

The measure has been pilot tested in 2 institutions for more than 1 year.

Evidence for Reliability/Validity Testing

Identifying Information

Original Title

Poor Quality Caregiver Involvement: the appropriateness of family/caregiver involvement.

Measure Collection Name

Method for Assessing Quality in Schizophrenia (MAQS)

Submitter

Young, Alexander S., MD, MSHS; Veterans Administration Desert Pacific Mental Illness Research, Education and Clinical Center (MIRECC); and University of California Los Angeles - None

Developer

Young, Alexander S., MD, MSHS; Veterans Administration Desert Pacific Mental Illness Research, Education and Clinical Center (MIRECC); and University of California Los Angeles - None

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Composition of the Group that Developed the Measure

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Financial Disclosures/Other Potential Conflicts of Interest

None

Adaptation

Measure was not adapted from another source.

Release Date

1997 Sep

Measure Status

This is the current release of the measure.

Source(s)

Young AS, Sullivan G, Burnam MA, Brook RH. Measuring the quality of outpatient treatment for schizophrenia. Arch Gen Psychiatry. 1998 Jul;55(7):611-7. [PubMed](#)

Measure Availability

The individual measure, "Poor Quality Caregiver Involvement: the Appropriateness of Family/Caregiver Involvement," is published in "Measuring the Quality of Outpatient Treatment for Schizophrenia."

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NQMC Status

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